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September 20, 2006

TO: Each Supervisor

FROM: Bruce A. Chernof, M.D.
Director and Chief Medical Officer

SUBJECT: **DEPARTMENT OF HEALTH SERVICES UPDATE – RE:
FISCAL OUTLOOK AND DEFICIT MANAGEMENT
ACTIONS**

Bruce A. Chernof, MD
Director and Chief Medical Officer

John R. Cochran III
Chief Deputy Director

William Loos, MD
Acting Senior Medical Officer

Attached (Attachments A1-A3) for your information is a Summary of Changes in the DHS Fiscal Outlook through September 18, 2006.

Cumulative Funding Shortfall Through Fiscal Year 2009-2010

The Summary begins by reflecting the Estimated Cumulative Year-End Fund Balances through March 24, 2006, the data cut-off of our last update. At that time, the projected cumulative funding shortfall through Fiscal Year 2009-2010 was \$1.35 billion. After 20 adjustments for a wide range of developments occurring from March 25 through September 7, 2006 including the addition of critical unfunded facility improvement needs (Attachment B), the cumulative shortfall is now expected to be \$1.16 billion. The number and amounts of these 20 changes testify to the continuing volatility of public hospital financing.

Medi-Cal Redesign

Among the 20 changes is an updated projection for revenues under the State's Medi-Cal Redesign Waiver, totaling \$153.7 million through Fiscal Year 2009-2010. These changes are the result of updates from the State regarding State-wide public hospital baseline revenues, private safety net hospital Medi-Cal revenue growth rates and use of recently available actual Fiscal Year 2004-2005 expenses, trended through the five-year Medi-Cal Redesign waiver period. We expect our Medi-Cal Redesign revenue projections to fluctuate further as a) more actual data become available, b) CMS provides specific direction regarding the Medi-Cal reimbursement of hospital-based physician costs, and c) legislation possibly changes the stabilization funding sharing ratios

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between the public and private safety net hospitals and among the public safety net hospitals. Both of these percentages expire June 30, 2007.

Deficit Management Plan

To address the updated \$1.16 billion cumulative shortfall, we have identified the following proposed/potential deficit management actions:

<u>Action</u>	<u>Estimated Cumulative \$ Impact Through Fiscal Year 2009-2010 (\$ in Millions)</u>
Estimated Cumulative Funding Shortfall Through Fiscal Year 2009-2010	\$(1,162.9)
Internal:	
Conversion of Nursing Registries to County Employees	\$ 19.1
Ancillary Service Improvements	19.6
Reduction in Medi-Cal TAR Denials	13.6
Resolution of Mental Health Services Issues	186.5
Unused Fiscal Year 2005-06 County Contribution	<u>47.0</u>
Adjusted Cumulative Shortfall	\$(877.1)
Subject to State/Federal Approval:	
Managed Care Rate Supplement	
Base Adjustment*	24.0
Proposed Recapture of CBRC Gap Payments	172.0
Medi-Cal Redesign "Coverage Initiative"	<u>162.0</u>
Adjusted Cumulative Shortfall	\$(519.1)
Subject of California Voter Approval:	
November 2006 Tobacco Tax Initiative	<u>336.0</u>
Adjusted Cumulative Shortfall	\$(183.1)
Pending Federal Rule	<u>(700.0)</u>
Adjusted Cumulative Shortfall	\$(883.1)

*The previous "base" amount for the managed care rate supplement included in the last Fiscal Outlook update of \$376 million is also "subject to State/Federal approval", but was included in the cumulative shortfall amount before the "Proposed Deficit Management Actions", since it was already in the CAO Proposed Budget for Fiscal Year 2006-2007.

As you can see from the above, the estimated cumulative shortfall through Fiscal Year 2009-2010 is potentially reducible to as low as \$183.1 million, **however**, \$694.0 million (plus the \$376 million referenced in the footnote above) is subject to State/Federal/Voter approval. While we are hopeful, such approvals will be forthcoming, we must caution that these approvals are by no means guaranteed, and the County must continue to press the State and Federal governments for approval of the Managed Care Rate Supplement and the pending application for full funding under the Medi-Cal Redesign "Coverage Initiative".

Lastly, in the event that the pending federal rule limiting Medicaid reimbursement to public hospitals to Medicaid cost and further restricting use of intergovernmental transfers is issued by CMS effective January 1, 2007, we conservatively estimate a cumulative Medi-Cal revenue loss of \$700 million, resulting in an estimated Adjusted Cumulative Shortfall of \$883.1 million. Governors, Congressional representatives, hospital associations and many others across the nation continue to vigorously oppose the issuance of this rule.

Strategic Plan

As discussed in our April 5 report, we continue our work to redevelop the Department's strategic plan, with a focus on ensuring our fiscal viability going forward. Among the areas currently being addressed are:

- Developing an appropriate health services benefit package for our uninsured patient population.
- Resolving longstanding mental health program issues, including underreimbursement for our facility-based psychiatric programs, complete transition of our outpatient mental health services to the Department of Mental Health, and reduction of mental health patients occupying hospital beds when lower levels of care are warranted.
- Improving patient flow processes throughout our system.
- Determining the appropriate role for our Community Health Plan.
- Standardizing of acuity-based staffing levels among our facilities using benchmarks of from other similarly situated health care institutions and reduction of staffing registry use.

- Increasing outpatient access to high-end diagnostics and procedures.
- Creating medical homes and increasing case management for chronically ill adults.
- Increasing the systematic operation of the Department including consolidation of services and standardization of equipment and supplies, a unique patient identifier, shared resources and technology, and refinement and increased enforcement of the DHS pharmaceutical formulary.
- Improving access to specialty care.
- Developing a workable strategic plan for information technology.
- Reviewing, and updating, as appropriate, our policies regarding undocumented aliens and revenue generating patients.
- Continuing to explore viable options for the continuation of Rancho Los Amigos National Rehabilitation Center.
- Improving systemization through better coordination of physician efforts.
- Reduction of Medi-Cal denied days.

We plan to provide the Board with the results of our efforts in this regard by early December of this year.

Please let me know if you have any questions or desire further information.

BAC:gww
609:005
(FISCAL OUTLOOK 092006)

Attachments

c: Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors

COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES
SUMMARY OF CHANGES IN THE DHS FISCAL OUTLOOK

MARCH 25, 2006 THROUGH SEPTEMBER 18, 2006

	Fiscal Year / Columns / \$ In Millions						Total / (6)
	05-06 / (1)	06-07 / (2)	07-08 / (3)	08-09 / (4)	09-10 / (5)	Total / (6)	
(1) Estimated Cumulative Year-End Fund Balances(Shortfalls) - March 24, 2006 ^(A)	\$ 257.1	\$ (98.6)	\$ (482.8)	\$ (930.4)	\$ (1,352.6)	\$ (1,352.6)	
(2) Increase <u>Medi-Cal Redesign</u> estimates to reflect the latest estimates through September 7, 2006.	32.2	40.5	20.7 ^(B)	26.4	33.9	153.7	
(3) Adjust <u>CBRC revenue</u> for the preliminary audit results from FY 02-03 based on information received at the audit exit conferences as compiled on July 25, 2006 and extended through FY 09-10. Additionally, remove managed care gap billing revenue per information received from the State on July 28, 2006, and extended through FY 09-10.	19.4 ^(C)	(24.1)	(24.8)	(25.5)	(26.3)	(81.3)	
(4) CAO decrease estimated salary costs per Board Adopted Budget on June 26, 2006.	-	13.0	13.0	13.0	13.0	52.0	
(5) CAO increase assumed <u>salary COLA</u> to 4%, 3%, and 3% assumed effective 1/1/07, 1/1/08, and 1/1/09, respectively per CAO on 9/18/06. (Previous estimate was 3% for FY's 06-07 through 09-10. FY 09-10 still assumed at 3%.)	-	(5.8)	(11.7)	(12.1)	(12.5)	(42.1)	
(6) Adjust <u>employee benefits</u> for the FY 05-06 final experience and update the inflation factor for variable benefits for FY's 07-08 through 09-10 based on previous years (FY's 02-03 through 04-05) experience (from 3% to 5%) developed on September 6, 2006.	5.4	0.4	(5.8)	(13.8)	(21.3)	(35.1)	
(7) Remove <u>CMAC Distressed Hospital Fund revenue</u> per letter from the State that DHS would not be receiving funding received on June 29, 2006. ^(D)	(7.0)	(7.0)	(7.0)	(7.0)	(7.0)	(35.0)	
(8) Increase <u>CHP IHSS revenue</u> for updated membership projections and a 25% rate increase for the IHSS program approved by the Board on June 13, 2006.	-	7.7	7.7	7.7	7.7	30.8	
(9) Reflect the one-time use of tobacco settlement funds (to replace previously assumed DHS funds) for the purchase of <u>CT Scanners</u> and the related capital projects in FY 06-07 per Board approval on June 26, 2006.	-	28.3	-	-	-	28.3	
(10) Adjust <u>medical school agreement costs</u> based on Board approved contracts for USC (approved August 29, 2006) and UCLA (approved June 20, 2006).	9.7 ^(E)	3.6	4.4	3.9	3.8	25.4	
(11) Increase prior year SB 1732 revenue primarily based on the inclusion of reimbursement for the LAC+USC Marengo parking lot and central plant, the H/UCLA central plant and emergency generators, K/DMC 2nd floor of the trauma center and the RLA central plant. Based on information received from the CAO in August 2006.	21.0	-	-	-	-	21.0	
(12) Adjust <u>pharmacy costs</u> for FY 06-07 based on the Supplemental Budget Resolution for September 26, 2006 and to reduce the inflation factors in FY's 07-08 through 09-10 based on information obtained from the CMS website on July 11, 2006. ^(F)	-	(1.6)	2.8	7.3	11.5	20.0	
(13) Add critical <u>unfunded facility improvement</u> needs (see Attachment B).	-	(0.4)	(6.5)	(7.5)	(5.0)	(19.4)	
(14) Decrease <u>Medicare liability</u> amounts per information received from HSA Programs and Audits on August 10, 2006. Reflects the release of funds that were held in trust in anticipation of possible liabilities resulting from negative outcomes during Medicare audits.	18.4	-	-	-	-	18.4	
(15) Adjust the <u>CHP equity distribution</u> based on revised estimates from the Office of Managed Care on July 26, 2006.	(0.2)	5.4 ^(G)	5.0 ^(G)	4.0 ^(G)	2.7 ^(G)	16.9	
(16) CAO reduce <u>debt service costs</u> to reflect the Tobacco Securitization per the Supplemental Budget Resolution for September 26, 2006.	-	16.7	-	-	-	16.7	
(17) Reduce LAC+USC costs for enablers required to meet the Harris/Rodde agreement per facility estimates provided on September 1, 2006. Reflects a one-time savings due to reduced spending in FY 05-06 enabler costs.	9.0	-	-	-	-	9.0	
(18) Adjust <u>LAC+USC order management/document imaging and transition costs</u> per facility estimates received on August 10, 2006.	4.4	4.8	11.3	(0.3)	(12.9)	7.3	
(19) Recognize grant revenue from <u>Queenscare</u> for LAC+USC per Board approval on June 27, 2006.	6.3	-	-	-	-	6.3	
(20) Other minor one-time and ongoing changes. ^(G)	8.2	(2.1)	(2.4)	(3.3)	(3.6)	(3.2)	
(21) Forecast improvement/(reduction) roll-forward	-	126.8 ^(H)	206.2 ^(H)	212.9 ^(H)	205.7 ^(H)	-	
(22) Revised Estimated Cumulative Year-End Fund Balances(Shortfalls) - September 18, 2006 ^(A)	\$ 383.9 ^(I)	\$ 107.6	\$ (269.9)	\$ (724.7)	\$ (1,162.9)	\$ (1,162.9)	

COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES
SUMMARY OF CHANGES IN THE DHS FISCAL OUTLOOK

MARCH 25, 2006 THROUGH SEPTEMBER 18, 2006

	Fiscal Year / Columns / \$ In Millions					
	05-06 / (1)	06-07 / (2)	07-08 / (3)	08-09 / (4)	09-10 / (5)	Total / (6)
(22) Revised Estimated Cumulative Year-End Fund Balances/(Shortfalls) - September 18, 2006 ^(A) (cont.)	\$ 383.9 ^(U)	\$ 107.6	\$ (269.9)	\$ (724.7)	\$ (1,162.9)	\$ (1,162.9)

Proposed/Potential Deficit Management Actions

Internal:

- (23) Conversion of Nursing Registries to County Employees ^(U)
- (24) Ancillary Services Improvements [Pharmacy (\$1.6M), Laboratory (\$0.5M), Standardized Medical Supplies (\$2.8M)]
- (25) Reduction in Medi-Cal TAR Denials (10%)
- (26) Resolution of Mental Health Services Issues
- (27) Unused FY 05-06 County Contribution
- (28) Forecast improvement/(reduction) roll-forward

(29) **Adjusted Estimated Cumulative Year-End Fund Balances/(Shortfalls) - September 18, 2006 ^(A)**
 if all Internal actions are successful

Subject to State/Federal Approval:

- (30) Manage Care Rate Supplement:
- (31) Base Adjustment
- (32) Proposed Recapture of CBRC Managed Care Gap Payment Loss
- (33) Medi-Cal Redesign Coverage Initiative Application
- (34) Forecast improvement/(reduction) roll-forward

(35) **Adjusted Estimated Cumulative Year-End Fund Balances/(Shortfalls) - September 18, 2006 ^(A)**
 if all Internal and Subject to State/Federal Approval actions are successful

Subject to California Voter Approval:

- (36) November 2006 Tobacco Tax Initiative
- (37) Forecast improvement/(reduction) roll-forward

(38) **Adjusted Estimated Cumulative Year-End Fund Balances/(Shortfalls) - September 18, 2006 ^(A)**
 if all Internal, Subject to State/Federal Approval and Subject to California Voter Approval actions are successful

- (39) Pending Federal Rule Limiting Medicaid Reimbursement to Public Hospitals to Medicaid Cost and Further Restricting Use of Intergovernmental Transfers (IGT's).
- (40) Forecast improvement/(reduction) roll-forward

(41) **Adjusted Estimated Cumulative Year-End Fund Balances/(Shortfalls) - September 18, 2006 ^(A)**
 if all Internal, Subject to State/Federal Approval and Subject to California Voter Approval actions are successful, but pending Federal rule adopted, effective 1/1/07 ^(N)

* The previous "base" amount for the managed care rate supplement included in the last Fiscal Outlook update of \$376 million is also "subject to State/Federal approval", but was included in the cumulative shortfall amount before the "Proposed Deficit Management Actions", since it was already in the CAO Proposed Budget for Fiscal Year 2006-07.

COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES
SUMMARY OF CHANGES IN THE DHS FISCAL OUTLOOK

MARCH 25, 2006 THROUGH SEPTEMBER 18, 2006

Notes

(A) - Assumes CBRC/FQHC will be extended for each year beyond FY 04-05. CBRC extension for LA County's outpatient and clinic care was included in the FY 05-06 and FY 06-07 Adopted State Budgets. A Medi-Cal State Plan Amendment to extend the program is currently pending CMS approval.
 - Includes estimated additional Medi-Cal Redesign funding, beyond pre Medi-Cal Redesign Medi-Cal revenue levels, of \$104.9M, \$132.6M, \$127.1M, \$139.1M, and \$153.0M for FY's 05-06 through 09-10, respectively, for a total benefit of \$656.7M over five years, up from the previous projection of \$503.0M.

(B) - Includes efficiency savings for K/DMC of \$20.9M, \$29.5M, \$30.8M, and \$32.1M for FY's 06-07 through 09-10 respectively
 The value of Medi-Cal Redesign from FY 06-07 to FY 07-08 was reduced due to the shifting of expenses from Medi-Cal Redesign to the Coverage initiative, resulting in less "donor" compensation.

(C) FY 05-06 reflects changes for FY's 02-03 through 05-06.

(D) Although this item is being removed from the fiscal outlook, DHS intends to fully pursue receiving this revenue in future fiscal years.

(E) FY 05-06 is significantly higher than the other years because of the removal of retroactivity to July 1, 2005 from the agreements. Amounts for FY's 06-07 through 09-10 are improved from the previous estimates primarily due to the correction of a COLA adjustment (LAC+USC) and recognition of existing funding used to offset cost increases (LAC+USC and H/UCLA). Incremental amounts by facility for each year are:

	FY 05-06	FY 06-07	FY 07-08	FY 08-09	FY 09-10	Total
USC	\$ 5.4	\$ 4.2	\$ 3.9	\$ 3.5	\$ 3.1	\$ 20.1
UCLA	4.3	(0.6)	0.5	0.4	0.7	5.3
	<u>\$ 9.7</u>	<u>\$ 3.6</u>	<u>\$ 4.4</u>	<u>\$ 3.9</u>	<u>\$ 3.8</u>	<u>\$ 25.4</u>

(F) Inflation factors for FY's 07-08, 08-09, and 09-10 decreased from 10.5%, 10.2%, and 9.8% to 8.0%, 8.1%, and 8.2%, respectively.

(G) Primary amounts include reduced medical malpractice in FY 05-06 and reduced vehicle license fees and Community Health Plan revenues in FY's 06-07 through 09-10.

(H) These amounts represent the cumulative change in the forecast from the prior fiscal year. For example, the \$126.8 million in FY 06-07 is \$383.9 million - \$257.1 million from FY 05-06.

(I) The \$383.9 million designation balance varies from our DHS Fiscal Year 2005-06 Year-End Budget Adjustment letter dated September 26, 2006 due to the fact that \$125.0 million of additional County contribution is maintained in a separate designation account in the County general fund and was excluded from the year-end budget adjustment. It is included here to show the total funds available to DHS at the end of FY 2005-06.

(J) Reflects the conversion of nursing registries to County employees beginning in FY 06-07.

(K) Amount updated from the \$1.0 million included in the March 24, 2006 Fiscal Outlook for additional CNA conversions included in the Supplemental Budget Resolution for September 26, 2006.

(L) Includes psych services \$40.7M, adjusted from previous amount of \$47.0M to reflect updated variance between State Maximum Allowance (SMA) and payment levels], admin days paid as acute days (\$2.8M), and the outpatient clinic at LAC+USC (\$1.1M). Amounts are for FY 06-07 and increased by a 3% COLA in FY's 07-08 through 09-10.

(M) This amount relates to the unused County contribution for the Managed Care Rate Supplement for FY 05-06. This amount is reserved in the County general fund in a designation account for DHS.

(N) Estimated loss of \$200 million per year for limits to Medicaid costs. If IGT's are further limited, some or all of an additional \$240 million per year is also in potential jeopardy.

(O) Amount increases from FY 05-06 to 06-07 due to increased enrollment projections and rate increases for IHSS. Net benefit declines in each successive fiscal year due to lower than previously anticipated membership growth in the previous estimates.

DEPARTMENT OF HEALTH SERVICES
FACILITY IMPROVEMENT NEEDS

	Project Description	Total
Harbor/UCLA Medical Center	Nurse Call System Replacement Fire Alarm Upgrade Main Hospital & 1 South ADA Handicapped Accessibility Remodel - HUCLA, Wilmington, LB, Bellflower	4,462 882 1,058 <u>6,402</u>
Total Harbor/UCLA Medical Center		
Martin Luther King Jr./Drew Medical Center	Duct Cleaning Acute Unit Fire Alarm System Infant Abduct-Alarm System	527 1,585 850 <u>2,962</u>
Total Martin Luther King Jr./Drew Medical Center		
Rancho Los Amigos Rehabilitation Center	Clinic Building 100 Refurbishment for ADA/HPAA Compliance Isolation Rooms/Bldg 900 HVAC Replacement - Phase II	656 809 <u>1,465</u>
Total Rancho Los Amigos Rehabilitation Center		
Olive View Medical Center	Duct Cleaning at Hospital Sylmar - Modular Medical Walk-In Clinic Fluoroscopy Upgrade (2D and E.R.)	2,319 2,188 525 <u>5,032</u>
Total Olive View Medical Center		
TOTAL HOSPITALS		<u>15,860</u>

ATTACHMENT B

DEPARTMENT OF HEALTH SERVICES
FACILITY IMPROVEMENT NEEDS

	Project Description	Total
HIGH DESERT MULTIPURPOSE AMBULATORY CARE CENTER		
	High Desert - Parking Lot Resurface	427
	Pharmacy Consolidation	505
		<u>932</u>
TOTAL HIGH DESERT MULTIPURPOSE AMBULATORY CARE CENTER		
COMPREHENSIVE HEALTH CENTERS / HEALTH CENTERS (CHC/HC)		
H. Claude Hudson CHC		
	Pharmacy Expansion	882
	American Disabilities Act	233
	Eye Clinic Construction	194
		<u>1,309</u>
Total H. Claude Hudson CHC		
Edward Roybal CHC		
	R&F Equipment Installation	282
	(4) Automatic Entry Doors	175
	Laboratory ADA Compliance	229
		<u>686</u>
Total Edward Roybal CHC		
EI Monte CHC		
	Replace surveillance Cameras and Monitors	618
	Duct Cleaning	219
	Lobby Registration: Remodel Workstations	175
		<u>1,012</u>
Total EI Monte CHC		
La Puente HC		
	Replace HVAC System	572
		<u>572</u>
Total La Puente CHC		

DEPARTMENT OF HEALTH SERVICES
FACILITY IMPROVEMENT NEEDS

	Project Description	Total
Long Beach CHC		
Total Long Beach CHC	Fire Safety Improvements	434 434
Mid Valley CHC		
Total Mid Valley CHC	Patient Access and Security Enhancements	183 183
Glendale HC		
Total Glendale HC	Glendale H.C. - Outpatient Pharmacy Expansion Glendale H.C. - Patient Access and Security Enhancements	395 176 571 4,767
TOTAL COMPREHENSIVE HEALTH CENTERS / HEALTH CENTERS (CHC/HC)		
TOTAL		21,560

DEPARTMENT OF HEALTH SERVICES
 FACILITY IMPROVEMENT NEEDS [4]
 (\$ in thousands)
 09/19/06

Project Description	Est. Expenditures FY05-07	Est. Expenditures FY07-08	Est. Expenditures FY08-09	Est. Expenditures FY09-10	FISCAL OUTLOOK SUB-TOTAL	Est. Expenditures FY10-11	Est. Expenditures FY11-12	Total
HOSPITALS								
Harbor/UCLA Medical Center	-	2,231	2,231	-	4,462	-	-	4,462
Nurse Call System Replacement	-	441	441	-	882	-	-	882
Fire Alarm Upgrade Main Hospital & 1 South	-	-	370	370	741	317	-	1,058
ADA Handicapped Accessibility Remodel - HUCLA, Wilmington, LB, Bellflower	-	2,672	3,042	370	6,085	317	-	6,402
Total Harbor/UCLA Medical Center	-	2,231	3,042	370	6,085	317	-	6,402
Martin Luther King Jr./Drew Medical Center	-	185	185	158	527	-	-	527
Duct Cleaning Acute Unit	-	555	555	475	1,585	-	-	1,585
Fire Alarm System	-	298	298	255	850	-	-	850
Infant Abduct-Alarm System	-	1,037	1,037	889	2,962	-	-	2,962
Total Martin Luther King Jr./Drew Medical Center	-	1,037	1,037	889	2,962	-	-	2,962
Rancho Los Amigos Rehabilitation Center	-	230	230	197	656	-	-	656
Clinic Building 100 Refurbishment for ADA/HIPAA Compliance	-	-	283	283	566	243	-	809
Isolation Rooms/Bldg 900 HVAC Replacement - Phase II	-	230	513	480	1,222	243	-	1,465
Total Rancho Los Amigos Rehabilitation Center	-	230	513	480	1,222	243	-	1,465
Olive View Medical Center	-	812	812	696	2,319	-	-	2,319
Duct Cleaning at Hospital	-	766	766	656	2,188	-	-	2,188
Symar - Modular Medical Walk-In Clinic	-	184	184	158	525	-	-	525
Fluoroscopy Upgrade (2D and E.R.)	-	1,761	1,761	1,509	5,032	-	-	5,032
Total Olive View Medical Center	-	1,761	1,761	1,509	5,032	-	-	5,032
TOTAL HOSPITALS	-	5,699	6,353	3,248	15,300	560	-	15,860
HIGH DESERT MULTIPURPOSE AMBULATORY CARE CENTER								
High Desert - Parking Lot Resurface	427	-	-	-	427	-	-	427
Pharmacy Consolidation	-	177	177	152	505	-	-	505
TOTAL HIGH DESERT MULTIPURPOSE AMBULATORY CARE CENTER	427	177	177	152	932	-	-	932
COMPREHENSIVE HEALTH CENTERS / HEALTH CENTERS (CHC/HC)								
H. Claude Hudson CHC	-	309	309	265	882	-	-	882
Pharmacy Expansion	-	-	-	81	81	81	70	233
American Disabilities Act	-	-	-	68	68	68	58	194
Eye Clinic Construction	-	309	309	414	1,031	149	128	1,309
Total H. Claude Hudson CHC	-	309	309	414	1,031	149	128	1,309
Edward Roybal CHC	-	99	99	85	282	-	-	282
R&F Equipment Installation	-	-	61	61	123	53	-	175
(4) Automatic Entry Doors	-	-	80	80	80	80	69	229
Laboratory ADA Compliance	-	99	160	226	484	133	69	686
Total Edward Roybal CHC	-	99	160	226	484	133	69	686
EI Monte CHC	-	216	216	185	618	-	-	618
Replace surveillance Cameras and Monitors	-	-	-	77	77	77	66	219
Duct Cleaning	-	-	-	61	61	61	53	175
Lobby Registration: Remodel Workstations	-	216	216	323	756	138	118	1,012
Total EI Monte CHC	-	216	216	323	756	138	118	1,012
La Puente HC	-	-	-	200	200	200	172	572
Replace HVAC System	-	-	-	200	200	200	172	572
Total La Puente HC	-	-	-	200	200	200	172	572
Long Beach CHC	-	-	-	152	152	152	130	434
Fire Safety Improvements	-	-	-	152	152	152	130	434
Total Long Beach CHC	-	-	-	152	152	152	130	434
Mid Valley CHC	-	64	64	55	183	-	-	183
Patient Access and Security Enhancements	-	64	64	55	183	-	-	183
Total Mid Valley CHC	-	64	64	55	183	-	-	183
Glendale HC	-	-	138	138	277	119	-	395
Glendale H.C. - Outpatient Pharmacy Expansion	-	-	62	62	123	53	-	178
Glendale H.C. - Patient Access and Security Enhancements	-	-	200	200	400	171	-	571
Total Glendale HC	-	-	200	200	400	171	-	571
TOTAL COMPREHENSIVE HEALTH CENTERS / HEALTH CENTERS (CHC/HC)	-	688	949	1,570	3,207	943	617	4,767
GRAND TOTAL	427	6,564	7,479	4,970	19,440	1,503	617	21,560